

DISCLOSURE SUMMARY PAGE

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FORM DR-2 (Rev. 07/2004) DISCLOSURE REPORT For Office Use Only Comm. # 6144

COMMITTEE NAME (Must be same as on Statement of Organization) Northwest Iowa Labor Council...COPE Fund

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT [Signature]

TELEPHONE 712 276-0473

DATE SIGNED 11 JAN 07

I AM FILING A December 31, 2006 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

CHECK IF AMENDMENT TO REPORT DATED

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.

Local Committees, enter Date of Election County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Includes rows for CASH ON HAND at beginning, ADD TOTAL MONEY TAKEN IN THIS PERIOD, and SUBTRACT TOTAL MONEY SPENT THIS PERIOD.

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY: CONSULTANT BREAKDOWN (Schedule G Attached?) VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For Instructions, See Back of Form

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Northwest Iowa Labor Council....COPE Fund

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND-RAISER INCOME
10/09/06	ID# CK#	Oct- Labor Council Per Cap 3038 S Lakeport Sioux City, IA 51106		\$135.76	<input type="checkbox"/>
10/31/06	ID# CK#	Bank Intrest Wells Fargo Sioux City, IA		.08	<input type="checkbox"/>
11/10/06	ID# CK#	Nov- Labor Council Per Cap 3038 S Lakeport Sioux City, IA 51106		171.72	<input type="checkbox"/>
11/30/06	ID# CK#	Bank Intrest Wells Fargo Sioux City, IA		.08	<input type="checkbox"/>
12/12/06	ID# CK#	Dec- Labor Council Per Cap 3038 S Lakeport Sioux City, IA 51106		275.76	<input type="checkbox"/>
12/29/06	ID# CK#	Bank Intrest Wells Fargo Sioux City, IA		.11	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 583.51	
<b>TOTAL (if last page of this schedule)</b>				\$ 583.51	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Northwest Iowa Labor Council....COPE Fund

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID# CK#			\$
	ID# CK#			
SUB-TOTAL				\$ 0.00
<b>TOTAL (if last page of this schedule)</b>				\$ 0.00

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)